

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines

12FE4M5

TOGETHER FOR OUR MAJORITY POLITICAL ACTION COMMITTEE (TOMPAC)

ADDRESS (number and street)

675 N Washington Street

Suite 410

☒(Check if address
is changed)

Alexandria

VA

22314

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐(Check if address
is changed)

bill@theoorbeekgroup.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

2. DATE

M M
1 2/ D D
2 0/ Y Y Y Y
2 0 1 0

3. FEC IDENTIFICATION NUMBER

C C00364174

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Daniel Canistra

Signature of Treasurer

Electronically Filed by Daniel Canistra

Date

M M
1 2/ D D
2 0/ Y Y Y Y
2 0 1 0

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2009)

C

Write or Type Committee Name

TOGETHER FOR OUR MAJORITY POLITICAL ACTION COMMITTEE (TOMPAC)**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor****Reynolds, Thomas M**

Mailing Address

8261 OLD POST RD E**E AMHERST****NY****14051**

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☒

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

William Oorbeek

Mailing Address

5903 Woodfield Estates Drive**Alexandria****VA****22310**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Executive Director

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

of Treasurer

Daniel Canistra

Mailing Address

675 N Washington Street**Suite 410****Alexandria****VA****22314**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer

Telephone number

703**548****8621**

Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wachovia

Mailing Address

210 Pennsylvania Avenue, SE

Washington

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

ING DIRECT

Mailing Address

P.O. Box 60

St. Cloud

MN

56302

0060

CITY ▲

STATE ▲

ZIP CODE ▲